

APPOINTMENT/QUALIFICATIONS OF CONTRACTING OFFICER

(PROPONENT IS NGB-AQ)

PRIVACY ACT STATEMENT

AUTHORITY: 10 USC, Section 1724 and Executive Order 9397.

PURPOSE: To determine if the individual meets the qualification requirements to serve in an acquisition position as a contracting officer with the authority to award and administer contracts in conformance with the Defense Acquisition Workforce improvement Act (DAWIA).

ROUTINE USES: None.

REQUEST FOR APPOINTMENT

REQUEST FOR RENEWAL

RECORD DATE

Introduction for completing this form. Include only the information requested (i.e., do not include training completed that is not pertinent to this request. List DAU courses or equivalent only.)

TO: PARC, NGB

THRU: (USFO)

FROM: (UNIT ADDRESS)

LAST NAME - FIRST NAME - MIDDLE

SSN:

MILITARY RANK, MOS/AFSC:

CURRENT JOB TITLE, SERIES, CIVILIAN GRADE:

LENGTH OF GOVERNMENT PROCUREMENT EXPERIENCE
(1101, 1105 Series, 97A/B, 65XX*, 65XXX*, 6COXX*)
(* "X" = Variable)

YRS & MOS:

CURRENT APPOINTMENT WILL EXPIRE:

DATE

CERT NO.

AMOUNT

STATUS: (check one)

____ ARNG TECHNICIAN*

____ ANG TECHNICIAN*

____ AGR (32 USC 502 (F))

____ DA OR DAF CIVILIAN EMPLOYEE (5 USC 2105)

* EXCEPTED OR COMPETITIVE

TYPE APPOINTMENT REQUESTED

TERM

DOLLAR LEVEL

____ Indefinite

____ Unlimited

____ 2 Years

____ Indefinite

____ 1 Year

____ Limited (Amount Requested)

____ SAP IAW FAR Part 13

CONTRACTING EXPERIENCE:

UNIT OR FIRM

DATES (FROM - TO)

POSITION HELD

FORMAL CONTRACTING SCHOOLS (DAU/EQUIVALENT COURSES ONLY)

COURSE TITLE	DATE SUCCESSFULLY COMPLETED	
ADDITIONAL DAU TRAINING REQUIRED		
COURSE TITLE	DATE SUCCESSFULLY COMPLETED	
TYPED NAME & GRADE OF APPLICANT NAME: _____ UNIT: _____ DSN: _____	SIGNATURE	DATE
VERIFICATION AND APPROVALS		
APPLICANT IS FULLY QUALIFIED AND I RECOMMEND APPOINTMENT. (Fully qualified means that the individual has met all mandatory requirements in accordance with PL 101, 510, dated Aug 96.)		
TYPED NAME & GRADE (COMDR/AIR GUARD UNIT IF APPLICABLE)	SIGNATURE	DATE
APPLICANT'S QUALIFICATIONS WERE VERIFIED AND I CONSIDER THE APPLICANT FULLY QUALIFIED. CERTIFICATION OF USPFO: APPLICANT'S QUALIFICATIONS HAVE BEEN VERIFIED AND ARE IN ACCORDANCE WITH PL 101-105, DATED 5 NOV 90. I CERTIFY THAT THIS INDIVIDUAL WILL PERFORM THE CONTRACTING FUNCTIONS AT THE DOLLAR AMOUNT REQUESTED.		
TYPED NAME & GRADE (USPFO)	SIGNATURE	DATE